



SUPPLEMENTAL APPLICATION DATA SHEET

Application Information

Application Number:: 10/721,741
Filing Date:: November 26, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?::
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CFR)?::
Number of Copies of CFR::
Title::
Attorney Docket Number::
Request for Early Publication?::
Request for Non-Publication?::
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?::
Latin Name::
Variety Denomination Name::
Petition Included?::
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship:: GERMANY
Country:: GERMANY
Status:: Full Capacity
Given Name:: Rudolf

Middle Name::
Family Name:: MÖLLER
Name Suffix::

City of Residence:: Gehrden
State or Province of Residence::
Country of Residence:: GERMANY
Street of Mailing Address:: Knülpweg 15c
City of Mailing Address:: Gehrden
State or Province of Mailing Address::
Country of Mailing Address:: GERMANY
Postal or Zip Code of Mailing Address:: D-30989

Applicant Authority Type:: Inventor
Primary Citizenship:: GERMANY
Country:: GERMANY
Status:: Full Capacity
Given Name:: Dirk

Middle Name::
Family Name:: KRÖGER
Name Suffix::

City of Residence:: Laatzen
State or Province of Residence::
Country of Residence:: GERMANY
Street of Mailing Address:: Rainer Maria Rilke Straße 13

City of Mailing Address::	Laatzen
State or Province of Mailing Address::	
Country of Mailing Address::	GERMANY
Postal or Zip Code of Mailing Address::	D-30880
Applicant Authority Type::	Inventor
Primary Citizenship::	GERMANY
Country::	GERMANY
Status::	Full Capacity
Given Name::	Salih
Middle Name::	
Family Name::	AGCA
Name Suffix::	
City of Residence::	Hannover
State or Province of Residence::	
Country of Residence::	GERMANY
Street of Mailing Address::	Leipziger Straße 21
City of Mailing Address::	Hannover
State or Province of Mailing Address::	
Country of Mailing Address::	GERMANY
Postal or Zip Code of Mailing Address::	D-30179
Applicant Authority Type::	Inventor
Primary Citizenship::	GERMANY
Country::	GERMANY
Status::	Full Capacity
Given Name::	Christoph
Middle Name::	
Family Name::	LEINDERS
Name Suffix::	

City of Residence:: Korschenbroich
State or Province of Residence::
Country of Residence:: GERMANY
Street of Mailing Address:: An Heldsmühle 65
City of Mailing Address:: Korschenbroich
State or Province of Mailing Address::
Country of Mailing Address:: GERMANY
Postal or Zip Code of Mailing Address:: D-41352

Correspondence Information

Correspondence Customer Number:: 26694
Phone Number:: 202-344-4000
Fax Number:: 202-344-8300
E-Mail Address::

Representative Information

Representative Customer Number:: 26694

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
GERMANY	102 55 640.7-14	November 28, 2002	YES

Assignee Information

Assignee Name::	Rexroth Mecman GmbH
Street of Mailing Address::	Bartweg 13
City of Mailing Address::	Hannover
State or Province of Mailing Address::	
Country of Mailing Address::	GERMANY
Postal or Zip Code of Mailing Address::	D-30453